

# Office of Multicultural Services: 2010 Cultural Competence Plan Requirements Modifications - Frequently Asked Questions

---

## 2010 CCPR Modification Technical Assistance FAQs:

---

**Q1. Does the prevalence data required in Criterion 2, page 9, use the same methodology for determining prevalence as originally done by Dr. Charles Holzer?**

A1. The prevalence data referred to in the Cultural Competence Plan Requirements (CCPR) Modification document on page 8 ([http://www.dmh.ca.gov/News/Reports\\_and\\_Data/default.asp](http://www.dmh.ca.gov/News/Reports_and_Data/default.asp) within the link titled "Severe Mental Illness (SMI) Prevalence Rates"), are mental illness prevalence estimates provided by Dr. Charles Holzer, Ph.D., of the University of Texas, Medical Branch. Dr. Holzer utilized the same methodology he originally utilized for previous work with the Department of Mental Health (DMH).

If you have questions about these tables, please contact Rita McCabe, DMH Data Management and Analysis Unit (916) 651-9370.

You can find prevalence data for all counties on the same link listed above. The data represents estimates of need for mental health services for California for SMI for 2007. County and state data from previous years are no longer on the DMH website.

---

**Q2. Does the prevalence data required in Criterion 2, page 9 of the CCPR Modification represent actual or estimated cases?**

A2. The data represents mental illness prevalence estimates of SMI. The rates should be understood as reasonable estimates of SMI prevalence rates, rather than counts of "actual" individuals.

If you have questions about these tables, please contact Rita McCabe, DMH Data Management and Analysis Unit (916) 651-9370.

---

**Q3. What does my county's prevalence data really mean?**

A3. The development of a working and comprehensive cultural competence plan is imperative if counties are to progress along the continuum of cultural competence and the reduction and elimination of racial, ethnic, and cultural mental health disparities. The county's internal process of data analysis during the development phase of the CCPR Modification is important. Counties are encouraged to have input from data analysts, Quality Improvement Coordinators, MHSA Coordinators, county contractors, and other county-identified key contributors. The Office of Multicultural Services does not provide analysis of a county's data.

---

**Q4. How many staff members need to complete the trainings required in Criterion 5 of the CCPR Modification?**

- A4. The county must demonstrate how they will train 100% of their staff within three years. DMH does not set a minimum of required hours for the required trainings listed on page 13-14 of the CCPR Modification.

For interpreter trainings, California Code of Regulations Title 9 1810.41(c)4 requires “a plan for cultural competency training for the administrative and management staff of the MHP, the persons providing specialty mental health services employed by or contracting with the MHP or with contractors of the MHP, and the persons employed by or contracting with the MHP or with contractors of the MHP to provide interpreter or other support services to beneficiaries.” The county shall demonstrate how those staff and contracted staff coming into direct contact with clients will be trained within three years.

---

**Q5. The Office of Multicultural Services’ website indicates there will be a “Technical Assistance Training for Redding, California”. When will that be held?**

- A5. The CCPR Modification was recently released as DMH Information Notice 10-17. Discussions between DMH, the California Mental Health Directors Association, and the Ethnic Services Managers (ESM) of the Superior Region are transpiring to ascertain when and where this training will be held. The Office of Multicultural Services will be updating its website to inform interested parties once the date is set. Counties will be given approximately 6 weeks notice (via email to all ESMs and small county directors) as to when the training will be held.

Due to travel restrictions and resource capacity issues, OMS is considering the possibility of webinars, telephone conference calls, and/or a face to face meeting in Redding, California.

---

**Q6. Will DMH accept early submissions of a county’s CCPR Modification so that DMH can review and provide feedback to the county?**

- A6. Counties may complete and submit their CCPR Modification prior to March 15, 2011; however, it is not expected that advance reviews will be conducted by DMH.

---

**Q7. Will CCPR Modification Updates to DMH be due every three years?**

- A7. Counties will submit their full CCPR Modification in March 2011, develop, complete, and submit a CCPR Modification Update in March 2012, as well as in March 2013, and then develop, complete, and submit a full CCPR Modification in 2014.
-

**Q8. What data source should I use to complete Criterion 2, I.A, general population by race, ethnicity, age, and gender?**

A8. A county may utilize their own source of data as long as the following is met:

1. the data meets the requirement
  2. the data is recent and indicates collection dates
  3. the data is well marked (what requirement does the data pertain to, acronyms are well explained, etc.)
  4. the source of the data is identified
- 

**Q9. Does Criterion 2 require our county to compare Medi-Cal eligibles to Medi-Cal beneficiaries in our system (by race, ethnicity, language, age, and gender)?**

A9. No, this statement is not correct. This CCPR Modification criterion does not require a county to compare Medi-Cal eligibles to Medi-Cal beneficiaries in your system (by race, ethnicity, language, age, and gender).

The CCPR Modification is requiring counties to summarize the Medi-Cal population (which are eligibles who hold a Medi-Cal card) by race, ethnicity, language, age, and gender and compare with client utilization data (or those currently using mental health services in your county or those that received some form of mental health services) by race, ethnicity, language, age, and gender.

Also, an important item to note is that a county may choose to utilize CAEQRO data or choose their own data source as long as the following is met:

1. the data meets the requirement
  2. the data is recent and indicates collection dates
  3. the data is well marked (what requirement does the data pertain to, acronyms are well explained, etc.)
  4. the source of the data is identified
- 

**Q10. How does our county complete Criterion 2, III, 200% of Poverty (minus Medi-Cal) population and service needs? Do we use the 200% of poverty population data (supplied by Holzer on the DMH website), subtract the Medi-Cal beneficiaries, and compare these numbers to the clients we serve who are not covered by Medi-Cal (by race, ethnicity, language, age, and gender)?**

A10. This is correct.

Additionally it is important to note that Counties are required to provide an analysis of disparities (per page 9, II B) as identified in the summaries of the data of the general population (by race, ethnicity, language, age, and gender), the Medi-Cal population (by race, ethnicity, language, age, and gender), and client utilization data (by race, ethnicity, language, age, and gender) (page 9, II B.).

---

**Q11. The CCPR Modification defines disparities in terms of unserved and underserved populations. Are counties permitted to include inappropriately served populations in the CCPR Modification?**

A11. Yes, disparities are defined by the county.

---

**Q12. How did DMH determine a 6th grade literacy level standard on all translated materials (CCPR Modification, page 19)?**

A12. The CCPR Modification requires translated materials be at an appropriate reading level (6th grade or lower) per the Department of Health Services and Managed Risk Medical Insurance Boards (MRMIBS). DMH utilized Health Service's Managed Care plan requirements as a base for the CCPR Modification.

---

**Q13. How should our county complete those areas of the CCPR Modification where WET and PEI information are required, if our county does not have an approved WET Plan or PEI Plan?**

A13. A county will not be punitively scored if the county MHSA WET or PEI plan(s) have not been approved by DMH.

---

**Q14. If our county is a behavioral health system, not just a mental health system, is it permissible to include only mental health data within our CCPR Modification?**

A14. The CCPR Modification requires specific information relating to a county's mental health system; however, including a more comprehensive view of data, beyond just mental health data, is permissible and encouraged.

The Department of Mental Health, Office of Multicultural Services acknowledges or recognizes that a total behavioral health approach to address disparities is in fact, more comprehensive. The CCPR Modification is designed and authorized specifically for county mental health programs only. Yes, please respond to CCPR Modification mental health specific data requirements. Additional behavioral health system information can be included.

---

**Q15.** Is there a tool that the Department of Mental Health (DMH), Office of Multicultural Services (OMS) prefers or recommends for organizational cultural competence assessment?

A15. As referenced in the Cultural Competence Plan Requirements (CCPR) ([DMH Information Notice No.: 10-17](#)), page 2, under background, "the revised CCPR (2010) criteria were developed from a compilation of the CCPR (2002), [Culturally and Linguistically Appropriate Services] CLAS, and other current cultural competence organizational assessment tools." The references for these organizational assessment tools are included in the CCPR, beginning on page 37. Since the OMS and the DMH's Cultural Competence Advisory Committee utilized a variety of source documents in establishing each of the CCPR Modification criteria, the OMS encourages counties to review the references provided on our website ([http://www.dmh.ca.gov/Multicultural\\_Services/Resources.asp](http://www.dmh.ca.gov/Multicultural_Services/Resources.asp)) and select a cultural competence organizational assessment or assessments that are feasible/applicable to the county.

---

**More FAQs Coming Soon!**